## CORPORATE OBJECTIVES, PRIORITIES AND PERFORMANCE MEASURES

FY 2014

#### DEPARTMENT:

# CORPORATION: PHILIPPINE HEART CENTER

#### I. CORPORATE PROFILE

- A. Brief Statement of Corporate Objectives
- B. Corporate Priorities for the Budget Year
- C. Major Programs and Projects

D. Linkages of Corporate Priorities/Programs/Projects with the Five Key Result Areas (KRAs), National/Sectoral Development Plan, The Medium-Term Philippine Development Plan (MTPDP), Agenda of the Administration and National Policy Pronouncements.

# II. CORPORATE PERFORMANCE MEASURES

Performance Indicators	P/A/P Code Component		201	3			014		
	Component		2013 Target			2014			
Indicators		nt				Target			
indicators	Activity	KRA	NG Support Borrowings	Corp. Funds	TOTAL	NG Support Borrowing	s Corp. Funds	TOTAL	
	OPERATIONS	Poverty							
		Reduction							
		and							
% of patients discharged as improved	E	mpowerme	nt	93.00%	93.00%		93.00%	93.00%	
Healthcare Associated Infection Rate (HCAI)		of the Poor		2.00%	2.00%		2.00%	2.00%	
Overall Mortality Rate – Cardiac Surgery		and the		3.00%	3.00%		3.00%	3.00%	
Client Satisfaction Rating		Vulnerable		90.00%	90.00%		90.00%	90.00%	
Number of ER patients disposed within 4 hours				85.00%	85.00%		85.00%	85.00%	
Occupancy Rate				80.00%	80.00%		80.00%	80.00%	
Average length of Stay				7 days	7 days		7 days	7 days	
% Increase in volume of Laboratory Out patient tests				10.00%	10.00%		10.00%	10.00%	
Increase in number of new patients				12.00%	12.00%		12.00%	12.00%	
Percentage of Filled prescriptions				97.00%	97.00%		97.00%	97.00%	
Number of clinical pathways implemented				3/year	3/year		3/year	3/yea	
Number of researches published and/or presented				60.00%	60.00%		60.00%	60.00%	
	Healthcare Associated Infection Rate (HCAI) Overall Mortality Rate – Cardiac Surgery Client Satisfaction Rating Number of ER patients disposed within 4 hours Occupancy Rate Average length of Stay % Increase in volume of Laboratory Out patient tests Increase in number of new patients Percentage of Filled prescriptions Number of clinical pathways implemented	Healthcare Associated Infection Rate (HCAI) Overall Mortality Rate – Cardiac Surgery Client Satisfaction Rating Number of ER patients disposed within 4 hours Occupancy Rate Average length of Stay % Increase in volume of Laboratory Out patient tests Increase in number of new patients Percentage of Filled prescriptions Number of clinical pathways implemented	% of patients discharged as improved       Empowerme         Healthcare Associated Infection Rate (HCAI)       of the Poor         Overall Mortality Rate – Cardiac Surgery       and the         Client Satisfaction Rating       Vulnerable         Number of ER patients disposed within 4 hours       Occupancy Rate         Average length of Stay       %         % Increase in volume of Laboratory Out patient tests       Increase in number of new patients         Percentage of Filled prescriptions       Number of clinical pathways implemented	% of patients discharged as improved       Reduction         #ealthcare Associated Infection Rate (HCAI)       of the Poor         Overall Mortality Rate – Cardiac Surgery       and the         Client Satisfaction Rating       Vulnerable         Number of ER patients disposed within 4 hours       Vulnerable         Occupancy Rate       Average length of Stay         % Increase in number of new patients       Heatmans         Percentage of Filled prescriptions       Number of clinical pathways implemented	Reduction andReduction and% of patients discharged as improvedEmpowerment93.00%Healthcare Associated Infection Rate (HCAI)of the Poor2.00%Overall Mortality Rate – Cardiac Surgeryand the3.00%Client Satisfaction RatingVulnerable90.00%Number of ER patients disposed within 4 hoursVulnerable90.00%Occupancy Rate85.00%85.00%Average length of Stay7 days% Increase in volume of Laboratory Out patient tests10.00%Increase in number of new patients97.00%Percentage of Filled prescriptions97.00%Number of clinical pathways implemented3/year	Reduction andReduction and% of patients discharged as improvedEmpowerment93.00%Healthcare Associated Infection Rate (HCAI)of the Poor and the2.00%Overall Mortality Rate – Cardiac Surgeryand the3.00%Client Satisfaction RatingVulnerable90.00%Number of ER patients disposed within 4 hoursVulnerable90.00%Occupancy Rate85.00%85.00%Average length of Stay7 days7 days% Increase in volume of Laboratory Out patient tests10.00%12.00%Percentage of Filled prescriptions97.00%97.00%Number of clinical pathways implemented3/year3/year	Reduction andReduction andP3.00%93.00%% of patients discharged as improvedEmpowerment93.00%93.00%Healthcare Associated Infection Rate (HCAI) Overall Mortality Rate – Cardiac Surgery Client Satisfaction Rating Number of ER patients disposed within 4 hours Occupancy Rate Average length of Stay % Increase in volume of Laboratory Out patient tests Increase in number of new patients Percentage of Filled prescriptionsVulnerable90.00% 90.00%90.00% 90.00%Number of clinical pathways implementedImplemented3/year3/year	Reduction andReduction andPart of patients discharged as improvedReduction and% of patients discharged as improvedEmpowerment93.00%93.00%93.00%Healthcare Associated Infection Rate (HCAI) Overall Mortality Rate – Cardiac Surgery Client Satisfaction Rating Number of ER patients disposed within 4 hours Occupancy Rate Average length of Stay % Increase in volume of Laboratory Out patient tests Increase in number of new patients Percentage of Filled prescriptionsVulnerable90.00% 90.00%90.00% 	

DBM Form No. 700

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# II. CORPORATE PERFORMANCE MEASURES

PART A. PHYSICAL PERFORMANCE										
		P/A/P Code		2013			2014			
	Performance	Component			Target		Target			
MFO	Indicators	Activity	KRA	NG Support Borrowings	Corp. Funds	TOTAL	NG Support	Borrowings	Corp. Funds	TOTAL
MFO 3 Public Information & Community Outreach Programs	Number of Conferences through telehealth	OPERATIONS	Poverty		6/year	6/year			6/year	6/year
			Reduction							
			and							
MFO 4 Effective Corporate Practices and Financial Governance		E	mpowerme	nt						
- Equitable health care Financing	% of Philhealth Reimbursements		of the Poor		10.00%	10.00%			10.00%	10.00%
	% of Quantified Free Services		and the	15.00%		10.00%	10.00%			10.00%
- Optimize Standard Staffing Pattern	% of Hospital Compliance to Standard Staffing Pattern		Vulnerable		85.00%	85.00%			85.00%	85.00%
	% of satisfied employees in Satisfaction survey				87.00%	87.00%			87.00%	87.00%
<ul> <li>Continuously modernize Equipment and Health Facilities</li> </ul>	% of facilities built or modernized according to hospital pl	an			80.00%	80.00%			80.00%	80.00%
- Promote best Practices in hospital financial Management	% Increase in Gross Hospital Revenue				10.00%	10.00%			10.00%	10.00%
	% Increase of Additional Funds from all Government So	urces			10.00%	10.00%			10.00%	10.00%
	% Increase in additional Funds from NGO's				10.00%	10.00%			10.00%	10.00%
B. General Administration and Support Services (GASS)		GASS								
- Promote Institutional Culture of trust and Accountability	% of Employees Attendance in Values Formation and Good Governance				85.00%	85.00%			85.00%	85.00%

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		P/A/P Code		2013			2014				
	Performance	Component		Target				Target			
MFO	Indicators	Activity	KRA	NG Support Borrowings	Corp. Funds	TOTAL	NG Support	Borrowings	Corp. Funds	TOTAL	
C. Support to Operations (STO)		STO	Poverty								
Widens Accessibility and Competitiveness			Reduction								
- Strengthen Core competencies and boost image	Number of Hospital Awards per year		and		1/ year	1/year			1/year	1/year	
	% of staff certified for AHA Basic & Advance Life suppor	: E	mpowerme	nt	60.00%	60.00%			60.00%	60.00%	
			of the Poor								
- Strengthen Linkages with stakeholders	Number of MOA'S between PHC and other Organizations		and the		3/year	3/year			3/year	3/year	
			Vulnerable								
- Institutionalize knowledge on hospital	% Functionality of hospital Information System				85.00%	85.00%			85.00%	85.00%	
information system											

Prepared by:

JULIET J. BALDERAS, M.D. Chairman, Office of Strategic Management

Date:\_\_\_\_\_5726 20,3

Approved by:

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MANUEL T. CHUA CHIACO, JR, M.D. Executive Director

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